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SHAW PITTMAN IP GROUP 1,650 TYSONS BOULEVARD SUITE 1300 MCLEAN, VA 22102  MAPR 0 6 2005  MR 1 1 2005  MR 1 200				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.				
MCLEAN, VA 221	02	W.	BAL				(Depositor	
		TRA	DEME				(Si	ignature)
								(Date)
APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION	NO.	
09/917,945	07/31/2001		Yoshitaka	Horie	KIX0	154-US	1541	
TITLE OF INVENTION: M	ETHOD OF MAKING WII	RELESS SEMICON	NDUCTOR DE	EVICE, AND LEADFRAME	USED THER	EFOR		
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1	1700	04/21/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS	7			
VU, QUANG D		2811		257-779000	_			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
PLEASE NOTE: Unless	37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appea Γ a substitute fo ) RESIDENCE	ar on the patent. If an assign filing an assignment.  E: (CITY and STATE OR COO, Japan				9 OP 9 OP
Please check the appropriate	assignce category or catego	ories (will not be pri	inted on the pat	tent): 🗖 Individual 🔯 (		other private gr	oup entity 🚨 Gover	rnment
4a. The following fec(s) are of the last o	mall entity discount permitt	ed)	Payment b	ee(s):  I the amount of the fee(s) is e y credit card. Form PTO-203 tor is hereby authorized by unt Number50-139	38 is attached.	uired fee(s), or	r credit any overpayn	nent, to
5. Change in Entity Status	(from status indicated above		<u> </u>			****		
a. Applicant claims SN	MALL ENTITY status. See	37 CFR 1.27.		nt is no longer claiming SMA				
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Authorized Signature	4 1/			Date A	pril 6,	2005		
<del>-</del> -	Michael Bedn		Registratio	n No. 32	2,329			
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